

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/501,804

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		0				
4	0					
5	0					
6		0				
7		0				
8	0					
9	0					
10	0					
11	0					
12	0					
13	0					
14	0					
15	0					
16	0					
17	0	0				
18	/					
19	/					
20	/					
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47						
48						
49						
50						
TOTAL IND.	3	0	0	0	0	0
TOTAL DEP.	16	0	0	0	0	0
TOTAL CLAIMS	19	0	0	0	0	0

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.	0	0	0	0	0	0
TOTAL DEP.	0	0	0	0	0	0
TOTAL CLAIMS	0	0	0	0	0	0

U.S. DEPARTMENT OF COMMERCE